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26986 7590 03/18/2004

MORRISS O'BRYANT COMPAGNI, P.C.
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Frank W. Compagni	(Depositor's name)
	(Signature)
4-28-04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/081,994	02/21/2002	Kyle Kafentzis	2128.KKAF.PT	1733

TITLE OF INVENTION: METHOD AND APPARATUS FOR VENDING FOOD PRODUCTS FROM A ROLLER-TYPE GRILLING APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	06/18/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
BECKER, DREW E	1761	426-394000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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1 MORRISS
2 O'BRYANT
3 COMPAGNI, P.C.

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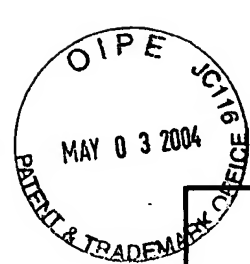
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TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/081,994
		Filing Date	February 21, 2002
		First Named Inventor	Kyle Kafentzis
		Group Art Unit	1761
		Examiner Name	BECKER, Drew E.
Total Number of Pages in This Submission (including this sheet)	3	Attorney Docket No.	2128.KKAF.PT

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Check in the amount of \$____ <input checked="" type="checkbox"/> Credit card authorization in the amount of \$ <u>695.00</u> <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ____ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request ____ month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input checked="" type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Other:	
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Attorney for Applicant	Frank W. Compagni, Registration No. 40,567 MORRISS O'BRYANT COMPAGNI, P.C. 136 South Main Street, Suite 700 Salt Lake City, Utah 84101 (801) 478-0071 telephone; (801) 478-0076 facsimile		
Signature		Date	4-28-04
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Typed or Printed Name	Frank W. Compagni		
Signature		Date	4-28-04